FEC FORM 1

## STATEMENT OF ORGANIZATION

| FORM 1                     | OR                              | GANIZATI               | ION   |              |                                |
|----------------------------|---------------------------------|------------------------|---|--------------|--------------------------------|
| . 0                        |                                 | (See instructions)     |   | Office       | use only                       |
| NAME OF COMMITTEE (in      |                                 |                        | Example: If typying, type over the lines  | 12FE4M5      | 1                              |
| Engineers Po               | litical Education Con           | mittee (EPEC)/li       | nternational Union of   |              |                                |
|                            |                                 |                        |   |              |                                |
| ADDRESS (number and        | street) 1125 17                 | th St, NW              |   |              |                                |
| (Check if add              | ress                            |                        |   |              |                                |
| is changed)                | Washing                         | aton                   |   | DC L         | 20036   -                      |
|                            |                                 | CIT                    | Y▲  | STATE▲       | ZIP CODE ▲                     |
| COMMITTEE'S E-MA           |                                 |                        |   |              |                                |
| , jiougiii yeruo           |                                 |                        |   |              |                                |
|                            |                                 |                        |   |              |                                |
| COMMITTEE'S WEE            | PAGE ADDRESS (URL)              |                        |   |              |                                |
|                            |                                 |                        |   |              |                                |
|                            |                                 |                        |   |              |                                |
| COMMITTEE'S FAX            | NUMBER                          |                        |   |              |                                |
| با لبنا                    |                                 |                        |   |              |                                |
| 2. DATE <b>M 0</b> 9       | M / D D / Y Y 2                 | 0 0 8                  |   |              |                                |
| 3. FEC IDENTIFIC           | ATION NUMBER                    | C                      | C00029504   | ]            |                                |
| 4. IS THIS STATE           | MENT NEW (N                     | OR                     | X AMENDED (A)   |              |                                |
| I certify that I have exan | nined this Statement and to the | ne best of my knowledg | e and belief it is true, correct an   | d complete   |                                |
|                            | Mr                              | Christopher J. H       | anlov   |              |                                |
| Type or Print Name of      | Treasurer                       | chinstopher o. ni      | amey  |              |                                |
| Signature of Treasure      | r Electronically Filed by       | Mr. Christoph          | er J. Hanley  | Date 05      | <b>29</b> / <b>2008</b>        |
| NOTE: Submission of fa     |                                 |                        | ect the person signing this State   |              | 2 U.S.C. S437g.                |
| Office<br>Use<br>Only      |                                 |                        | For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100 | ion <b>F</b> | EC FORM 1<br>(Revised 02/2003) |

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|    | FEO <b>Fo</b> r               | m 1 (Revised 02/2003)  | Page 2                                  |
|----|-------------------------------|--|---|
| 5. | TYPE OF CO                    | MMITTEE (Check One)  |   |
|    | (a)                           | This committee is a principal campaign committee. (Complete the candidate information below.)                        |   |
|    | (b)                           | This committee is an authorized committee, and is NOT a principal campaign committee. (Complete tinformation below.) | he candidate                            |
|    | Name of<br>Candidate          |  |   |
|    | Candidate<br>Party Affiliatio | Office Sought: House Senate President  | State District                          |
|    | (c)                           | This committee supports/opposes only one candidate, and is NOT an authorized committee.                              |   |
|    | Name of<br>Candidate          |  |   |
|    | (d) X                         | This committee is a (National, State (or subordinate) committee of the   | (Democratic,<br>Republican,etc.) Party. |
|    | (e)                           | This committee is a separate segregated fund   |   |
|    | (f)                           | This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee.          | d fund or party                         |
| 6. | Name of Any                   | Connected Organization or Affiliated Committee   |   |
|    |                               |  |   |
|    | Mailing Addre                 | 3520 E COOK ST   |   |
|    | -                             |  |   |
|    |                               | SPRINGFIELD IL   | 62703                                   |
|    |                               | CITY STATE A   | ZIP CODE                                |
|    | Relationship                  | AFFILIATED   |   |
|    | Type of Conn                  | ected Organization:  |   |
|    | Corp                          | oration Corporation w/o Capital Stock Labor Organ  | ization                                 |
|    | Mem                           | nbership Organization Trade Association Cooperative  |   |

| FEC Form 1 ( | (Revised 02/2003) |  |
|--------------|-------------------|--|
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Page 3

Write or Type Committee Name

|    | Engineers Poli   | tical Education Committee (EPEC)/Inte  | ernational Union of Operation                  | ng Engine | ers         |      |  |  |  |  |  |
|----|--|--|--|-----------|-------------|------|--|--|--|--|--|
| 7. | Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records. |  |  |           |             |      |  |  |  |  |  |
|    | Full Name  | Mr. John W, Loughry Full Name  |  |           |             |      |  |  |  |  |  |
|    | Mailing Address  | 12607 Shoal Cree   | ek Terrace                                     |           |             |      |  |  |  |  |  |
|    |  | Beltsville   |  | <u> </u>  | 20705 _     |      |  |  |  |  |  |
|    | Title or Position ♥  | CITY A   | STA  | ГЕ▲       | ZIP CODE A  |      |  |  |  |  |  |
|    | C  | FO   | Telephone number                               | 202       |             | 2623 |  |  |  |  |  |
| 8. | name and addre   | the name and address (phone number ess of any designated agent (e.g., assistat | optional) of the treasurer of that treasurer). | ne commit | ee; and the |      |  |  |  |  |  |
|    | Full Name of Treasurer   | Mr. Christopher J. Hanley  |  |           |             |      |  |  |  |  |  |
|    | Mailing Address  | 1125 17th ST, NV   | V  |           |             |      |  |  |  |  |  |
|    |  | WASHINGTON   |  | 2 _       | 20036       |      |  |  |  |  |  |
|    | Title or Position ♥  | CITY A   | STAT   | ГЕ▲       | ZIP CODE A  |      |  |  |  |  |  |
|    |  |  | Telephone number                               |           |             |      |  |  |  |  |  |
|    | Full Name of Designated Agent  |  |  |           |             |      |  |  |  |  |  |
|    | Mailing Address  |  |  |           |             |      |  |  |  |  |  |
|    |  |  |  |           | _           |      |  |  |  |  |  |
|    | Title or Position ▼  | CITY A   | STAT   | <br>`E.▲  | ZIP CODE A  |      |  |  |  |  |  |
|    |  |  | Telephone number                               |           |             |      |  |  |  |  |  |
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| FEC Form 1 (Re                                 | evised 02/2003)       | Page 4          |
|--|-----------------------|-----------------|
| Banks or Other Depo<br>safety deposit boxes or |                       | accounts, rents |
| Name of Bank, Deposi                           | itory, etc.           |                 |
| لــا   | Sun Trust Bank        |                 |
| Mailing Address                                | Post Office Box 85024 |                 |
|  |                       |                 |
|  | Richmond VA           | 23285   _       |
|  | CITY A STATE A        | ZIP CODE 🛕      |
| Name of Bank, Deposi                           | itory, etc.           |                 |
|  |                       |                 |
| Mailing Address                                |                       |                 |
|  |                       |                 |
|  |                       |                 |

CITY 🔼

STATE **△** 

ZIP CODE 🛕

| FEC Form 1 (Revised   | d 1/2001)                            | Page <b>5</b> / <b>79</b>                                    |
|---|--------------------------------------|--|
| Banks or Other Depositor safety deposit boxes or mair Name of Bank, Depository, 6 | ntains funds.                        | nittee deposits funds, holds accounts, rents  [ ADDITIONAL ] |
| Maine of Bank, Depository, 6  | 510.                                 |  |
|   |                                      |  |
| Mailing Address   |                                      |  |
|   |                                      |  |
|   |                                      |  |
|   | CITY 🛕                               | STATE ZIP CODE A   |
|   |                                      |  |
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|   |                                      |  |
| Name of Any Connected   | Organization or Affiliated Committee | [ ADDITIONAL ]   |
| •   |                                      | [ ADDITIONAL ]   |
| LOCAL 94-94A-94B IU   | OE POLITICAL ACTION COMMITTEE        |  |
|   |                                      |  |
| Mailing Address   | 331 - 337 W 44 ST                    |  |
| •   | 1                                    |  |
|   | NEW YORK                             | NY     10036     5402  |
|   | CITY▲                                | CTATE A ZID CODE A   |
|   | CITY                                 | STATE ▲ ZIP CODE ▲   |
| Relationship AFFI   | ILIATED                              |  |
| Type of Connected Organiz   | ration:                              |  |
| Corporation   | Corporation w/o Capital Stock        | Labor Organization   |
| Membership Orga   |                                      | Cooperative  |
|   |                                      |  |

| Designated Agent    |        | [ ADDITIONAL ]   |            |  |
|---------------------|--------|------------------|------------|--|
| Full Name LILIL     |        |                  |            |  |
| Title or Position ▼ | CITY A | STATE            | ZIP CODE A |  |
|                     |        | Felephone number |            |  |

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|---|--------------------------------------|--------------------------------|---------------------------|
| Banks or Other Deposito safety deposit boxes or mai |                                      | which the committee deposits f |                           |
| Name of Bank, Depository,                           | etc.                                 |                                | [ ADDITIONAL ]            |
|   |                                      |                                |                           |
| Mailing Address                                     |                                      |                                |                           |
|   |                                      |                                |                           |
|   |                                      |                                |                           |
|   | CITY 🛕                               | STATE                          | ZIP CODE 🛕                |
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| -   |                                      |                                |                           |
| Name of Any Connected                               | Organization or Affiliated Committee |                                | [ ADDITIONAL ]            |
| INTERNATIONAL UNI                                   | ON OF OPERATING ENGINEERS LC         | OCAL 139 FEDERAL PAC           | IUOE LOCAL 139 FEDERAL PA |
|   |                                      |                                |                           |
| Mailing Address                                     | N27 W 23233 ROUNDY DRIVE             |                                |                           |
|   | 1                                    |                                | 1                         |
|   | PEWAUKEE                             | <b></b>                        | 53072                     |
|   | CITY▲                                | STATI                          | ZID CODE A                |
|   | CITY                                 | STATE                          | E ▲ ZIP CODE ▲            |
| Relationship AFF                                    | ILIATED                              |                                |                           |
| Type of Connected Organi                            | zation:                              |                                |                           |
| Corporation   | Corporation w/o                      | Capital Stock                  | Labor Organization        |
| Membership Orga                                     | anization Trade Association          | on                             | Cooperative               |

| Designated Agent                  | [ ADDITIONAL ] |                |            |
|-----------------------------------|----------------|----------------|------------|
| Full Name LILILI  Mailing Address |                |                |            |
| Title or Position ▼               | CITY A         | STATE          | ZIP CODE 🛦 |
|                                   | Tel            | lephone number |            |

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|--|---|---------------------------|
| Banks or Other Depositor safety deposit boxes or mai |   |                           |
| Name of Bank, Depository,                            | etc.                                    | [ ADDITIONAL ]            |
|  |   |                           |
| Mailing Address                                      |   |                           |
|  |   |                           |
|  |   |                           |
|  | CITY                                    | CTATE 4 ZID CODE 4        |
|  | CITY 🛕                                  | STATE ▲ ZIP CODE ▲        |
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| Name of Any Connected                                | I Organization or Affiliated Committee  |                           |
| Name of Any Connected                                | Organization of Anniated Committee      | [ ADDITIONAL ]            |
| INTERNATIONAL UNI                                    | ON OF OPERATING ENGINEERS LOCAL 295 PAC |                           |
| <u>.</u>   |   |                           |
| Nacilian Address                                     | 61-04 MAURICE AVE                       |                           |
| Mailing Address                                      | 1                                       |                           |
|  | . MAGDETU                               |                           |
|  | MASPETH                                 | NY 11378                  |
|  | CITY                                    | STATE ▲ ZIP CODE ▲        |
| Relationship   AFF                                   | FILIATED                                |                           |
|  |   |                           |
| Type of Connected Organi                             |   | П                         |
| Corporation  | Corporation w/o Capital Stock           | Labor Organization        |
| Membership Orga                                      | anization Trade Association             | Cooperative               |

| Designated Agent    |        | [ /             | ADDITIONAL ] |
|---------------------|--------|-----------------|--------------|
| Full Name           |        |                 |              |
| Mailing Address     |        |                 | _            |
| Title or Position ▼ | CITY A | STATE           | ZIP CODE A   |
|                     | Te     | elephone number |              |

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|---|---------------------------|-------------------------------------|----------------------|----------------------------|
| Banks or Other Depositor safety deposit boxes or ma |                           | r other depositories in which the c |                      |                            |
| Name of Bank, Depository                            | , etc.                    |                                     | [                    | ADDITIONAL ]               |
|   |                           |                                     |                      |                            |
| Mailing Address                                     |                           |                                     |                      |                            |
|   |                           |                                     |                      |                            |
|   |                           |                                     |                      |                            |
|   |                           | CITY 🛕                              | STATE. <b>△</b>      | ZIP CODE 🛕                 |
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|   |                           |                                     |                      |                            |
| Name of Any Connected                               | d Organization or Affilia | ated Committee                      | Г                    | ADDITIONAL ]               |
|   |                           |                                     | _                    | _                          |
| LOCAL 399 INTERNA                                   | TIONAL UNION OF           | OPERATING ENGINEERS                 | FEDERAL PAC (LOCAL 3 | 399 IUOE FED PAC)          |
|   |                           |                                     |                      |                            |
| Mailing Address                                     | 763 W JACK                | SON BLVD                            |                      |                            |
|   |                           |                                     |                      |                            |
|   | CHICAGO                   |                                     | <u> </u>             | 60661                      |
|   |                           | CITY                                | STATE A              | ZIP CODE                   |
| Relationship   AF                                   | FILIATED                  |                                     |                      | 1                          |
| •   |                           |                                     |                      |                            |
| Type of Connected Organ                             | nization:                 |                                     | П                    |                            |
| Corporation   |                           | Corporation w/o Capital Stock       |                      |                            |
| Membership Org                                      | ganization                | Trade Association                   | Cooperativ           | e                          |

| Designated Agent    |        |                  | [ ADDITIONAL ] |
|---------------------|--------|------------------|----------------|
| Full Name           |        |                  |                |
| Title or Position ♥ | CITY A | STATE            |                |
|                     |        | Felephone number |                |

| safety deposit boxes or<br>Name of Bank, Deposit |                                     |                                   |                | [ ADDITIONAL ] |
|--|-------------------------------------|-----------------------------------|----------------|----------------|
|  |                                     |                                   |                |                |
| Mailing Address                                  |                                     |                                   |                |                |
|  |                                     |                                   |                |                |
|  |                                     |                                   |                |                |
|  |                                     | CITY 🛕                            | STATE <b>△</b> | ZIP CODE 🛕     |
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|  |                                     |                                   |                |                |
|  |                                     |                                   |                |                |
| Name of Any Connec                               | cted Organization or Aff            | filiated Committee                |                | [ ADDITIONAL 1 |
|  | cted Organization or Aff            |                                   |                | [ ADDITIONAL ] |
|  | cted Organization or Aff            |                                   |                | [ ADDITIONAL ] |
|  |                                     |                                   |                | [ ADDITIONAL ] |
|  | LOCAL 3 ENDORSE                     |                                   |                | [ ADDITIONAL ] |
| SUPPORTERS OF                                    | LOCAL 3 ENDORSE                     | ED CANDIDATES                     |                | [ ADDITIONAL ] |
| SUPPORTERS OF                                    | LOCAL 3 ENDORSE                     | ED CANDIDATES                     |                | [ ADDITIONAL ] |
| SUPPORTERS OF                                    | LOCAL 3 ENDORSE                     | ED CANDIDATES                     | CA STATE ▲     |                |
| SUPPORTERS OF  Mailing Address                   | LOCAL 3 ENDORSE                     | ED CANDIDATES  IH LOOP ROAD  CITY |                | 94501          |
| SUPPORTERS OF  Mailing Address  Relationship     | LOCAL 3 ENDORSE  1620 SOUT  ALAMEDA | ED CANDIDATES                     |                | 94501          |
| SUPPORTERS OF  Mailing Address                   | LOCAL 3 ENDORSE  1620 SOUT  ALAMEDA | ED CANDIDATES  IH LOOP ROAD  CITY |                | 94501          |
| SUPPORTERS OF  Mailing Address  Relationship     | LOCAL 3 ENDORSE  1620 SOUT  ALAMEDA | ED CANDIDATES  IH LOOP ROAD  CITY | STATE A        | 94501          |

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| Designated Agent    |        | [ ADDITIONAL ]      |
|---------------------|--------|---------------------|
| Full Name           |        |                     |
| Mailing Address     |        | _                   |
| Title or Position ♥ | CITY A | STATE A ZIP CODE A  |
|                     | Te     | elephone number = = |

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|---|---------------------------|---------------------------------------|--------------------|----------------------------|
| Banks or Other Deposito<br>safety deposit boxes or mai<br>Name of Bank, Depository, | intains funds.            | r other depositories in which the cor |                    | accounts, rents            |
| name of bank, Depository,   | eic.                      |                                       | •                  |                            |
|   |                           |                                       |                    |                            |
| Mailing Address   |                           |                                       |                    |                            |
|   |                           |                                       |                    |                            |
|   |                           |                                       |                    |                            |
|   |                           | CITY 🛕                                | STATE <b>△</b>     | ZIP CODE 🛕                 |
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|   |                           |                                       |                    |                            |
| Name of Any Connected   | l Organization or Affilia | ited Committee                        | Г                  | ADDITIONAL ]               |
| . INTERNATIONAL LINE  |                           |                                       | _                  | _                          |
| INTERNATIONAL UNI   | ON OF OPERATING           | ENGINEERS LOCAL 4 SOC                 | CIAL ACTION COMMIT | EE-FEDERAL                 |
|   |                           |                                       |                    |                            |
| Mailing Address   | 16 TROTTER                | DRIVE                                 |                    |                            |
|   | 1                         |                                       |                    | <b>.</b>                   |
|   | MEDWAY                    |                                       | MA                 | 02053   _                  |
|   |                           |                                       |                    |                            |
|   |                           | CITY▲                                 | STATE 🛕            | ZIP CODE 🛦                 |
| Relationship AFF  | FILIATED                  |                                       |                    |                            |
| Type of Connected Organi  | ization:                  |                                       |                    |                            |
| Corporation   |                           | Corporation w/o Capital Stock         | Labor Org          | anization                  |
| Membership Orga   | anization                 | Trade Association                     | Cooperativ         |                            |
|   |                           |                                       | ш                  |                            |

| Designated Agent    |        | [ ADDITIONAL ]  |
|---------------------|--------|-----------------|
| Full Name           |        |                 |
| Title or Position ▼ | CITY & |                 |
|                     |        | elephone number |

|  | ised 1/2001)   | Page <b>17</b> / <b>79</b>    |
|--|--|-------------------------------|
| Banks or Other Deposit safety deposit boxes or m | naintains funds.   | ·                             |
| Name of Bank, Depositor                          | ry, etc.   | [ ADDITIONAL ]                |
|  |  |                               |
| Mailing Address                                  |  |                               |
|  |  |                               |
|  |  |                               |
|  | CITY 🛕   | STATE ZIP CODE A              |
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| Name of Any Connecte                             | ed Organization or Affiliated Committee                              | [ ADDITIONAL ]                |
| - ODEDATING ENGIN                                | IEEDS LOCAL 12 VOLUNTARY LEGISLATIVE EURO                            | [                             |
| OPERATING ENGIN                                  | IEERS LOCAL 12 VOLUNTARY LEGISLATIVE FUND                            |                               |
|  |  |                               |
|  |  |                               |
| Mailing Address                                  | 150 EAST CORSON STREET   |                               |
| Mailing Address                                  |  |                               |
| Mailing Address                                  |  | GA91103                       |
| Mailing Address                                  | PASADENA   | CA 91103 _                    |
|  | PASADENA CITYA   |                               |
|  | PASADENA   | CA 91103 _                    |
| . As   | PASADENA CITYA   | CA 91103 _                    |
| Relationship AF                                  | PASADENA CITYA   | CA 91103 _                    |
| Relationship AF  Type of Connected Orga          | PASADENA  CITY  FFILIATED  anization:  Corporation w/o Capital Stock | CA 91103 _ STATE ▲ ZIP CODE ▲ |

| Designated Agent    |        | [ ADDITIONAL ]      |
|---------------------|--------|---------------------|
| Full Name           |        |                     |
|                     |        |                     |
| Title or Position ▼ | CITY A | STATE A ZIP CODE A  |
|                     |        | elephone number = = |

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|---|---|--------------------------------|
| Banks or Other Depositoric<br>safety deposit boxes or main<br>Name of Bank, Depository, e | tains funds.                                  | s funds, holds accounts, rents |
| Name of Bank, Depository, e   | ic.   | [                              |
|   |   |                                |
| Mailing Address   |   |                                |
|   |   |                                |
|   |   |                                |
|   | CITY ▲ STAT                                   | TE⊿ ZIP CODE △                 |
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|   |   |                                |
| Name of Any Connected C   | Organization or Affiliated Committee          | [ ADDITIONAL ]                 |
|   |   | _                              |
| INTERNATIONAL UNIO  | N OF OPERATING ENGINEERS LOCAL 14-14B VOLUNTA | RY POLITICAL COMMITTEE         |
| 1   |   |                                |
|   | 141 - 57 NORTHERN BOULEVARD                   |                                |
| Mailing Address   | 141-37 NORTHERN BOOLEVARD                     |                                |
|   |   |                                |
|   | FLUSHING                                      | Y     11354                    |
|   |   |                                |
|   | CITY <b>≜</b> STA                             | TE ▲ ZIP CODE ▲                |
| . AEEU  | LIATED  |                                |
| Relationship  |   |                                |
| Type of Connected Organiza  | ation:  |                                |
| Corporation   | Corporation w/o Capital Stock                 | Labor Organization             |
|   |   |                                |
| Membership Organ  | ization Trade Association                     | Cooperative                    |

| Designated Agent    |        |                 | [ ADDITIONAL ] |
|---------------------|--------|-----------------|----------------|
| Full Name           |        |                 |                |
| •                   |        |                 |                |
| Title or Position ♥ | CITY A | STATE &         | ZIP CODE A     |
|                     | т      | elephone number |                |

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|--|--|-------------------------------|
| Banks or Other Deposi<br>safety deposit boxes or r   |  |                               |
| Name of Bank, Deposito                               | ory, etc.  | [ ADDITIONAL ]                |
| L  |  |                               |
| Mailing Address                                      |  |                               |
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|  |  |                               |
|  | CITY 🛕   | STATE ZIP CODE A              |
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| Name of Any Connect                                  | eted Organization or Affiliated Committee  | [ ADDITIONAL 1                |
|  |  | [ ADDITIONAL ]                |
|  | eted Organization or Affiliated Committee  | [ ADDITIONAL ]                |
|  |  | [ ADDITIONAL ]                |
|  |  | [ ADDITIONAL ]                |
| I.U.O.E. LOCAL 15                                    | POLITICAL ACTION COMMITTEE  265 WEST 14TH STREET   | [ ADDITIONAL ]                |
| I.U.O.E. LOCAL 15                                    | POLITICAL ACTION COMMITTEE  265 WEST 14TH STREET   |                               |
| I.U.O.E. LOCAL 15                                    | POLITICAL ACTION COMMITTEE  265 WEST 14TH STREET  NEW YORK   | NY 10011 _                    |
| I.U.O.E. LOCAL 15                                    | POLITICAL ACTION COMMITTEE  265 WEST 14TH STREET   |                               |
| I.U.O.E. LOCAL 15  Mailing Address                   | POLITICAL ACTION COMMITTEE  265 WEST 14TH STREET  NEW YORK   | NY 10011 _                    |
| Mailing Address                                      | POLITICAL ACTION COMMITTEE  265 WEST 14TH STREET  NEW YORK  CITY  AFFILIATED                                 | NY 10011 _                    |
| Mailing Address  Relationship                        | POLITICAL ACTION COMMITTEE  265 WEST 14TH STREET  NEW YORK  CITY  AFFILIATED                                 | NY 10011 _                    |
| Mailing Address  Relationship  Type of Connected Org | POLITICAL ACTION COMMITTEE  265 WEST 14TH STREET  NEW YORK  CITY  Ganization:  Corporation w/o Capital Stock | NY 10011 _ STATE A ZIP CODE A |

| Designated Agent    |        |                 | [ ADDITIONAL ] |
|---------------------|--------|-----------------|----------------|
| Full Name           |        |                 |                |
| •                   |        |                 |                |
| Title or Position ♥ | CITY A | STATE &         | ZIP CODE A     |
|                     | т      | elephone number |                |

| safety deposit boxes on Name of Bank, Depos  |                        |              |         |         |                |         |       |                    |              |     |      |          | [   | AD   | DITI               | ONA             | AL]         |
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| Mailing Address  |                        |              |         |         |                |         |       |                    |              |     |      |          |     |      |                    |                 |             |
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|  |                        |              |         |         |                |         |       |                    |              |     |      |          |     |      |                    |                 |             |
| Name of Any Conn   | ected Organ            | nizatior     | n or Af | filiate | d Com          | mittee  |       |                    |              |     |      |          |     |      | DITI               | ONA             |             |
|  |                        |              |         |         |                |         |       |                    |              |     |      |          |     |      | DITI               | ONA             | AL ]        |
|  |                        |              |         |         |                |         | /LOCA | , 17 P             | OLITI        | CĄL | ACT  | TON      |     |      |                    | ONA             | <b>NL ]</b> |
|  |                        |              |         |         |                |         | /LOCA | <sub>7</sub> 17 P( | <b>OLITI</b> | CAL | ACT  | TON.     |     |      |                    | ONA<br>         | <b>AL ]</b> |
| NTERNATIONAL   |                        | F OPE        | ERAT    | ING E   |                | IEERS,  | /LOCA | , 17 Pe            | <b>OLITI</b> | CAL | ACT  | TON      |     |      |                    | ONA             | <b>AL ]</b> |
| NTERNATIONAL   |                        | F OPE        | ERAT    | ING E   | ENGIN          | IEERS,  | /LOCA | 17 P               | <b>OLITI</b> | CAL | ACT  | TION     |     |      |                    | ONA             | <b>AL ]</b> |
| NTERNATIONAL   |                        | 5959         | VARS    | ING E   | ENGIN          | IEERS,  | /LOCA | 17 P               | OLITI(       | CAL |      |          |     | IMIT | TEE                | ON#             | <b>AL ]</b> |
| NTERNATIONAL   |                        | F OPE        | VARS    | ING E   | ENGIN          | IEERS,  | /LOCA | 17 P               | <b>OLITI</b> | CAL | ACT  |          |     | IMIT |                    | ON#             | AL ]        |
| NTERNATIONAL   |                        | 5959         | VARS    | ING E   | ENGIN<br>ES R  | IEERS,  | /LOCA | - 17 Pe            | <b>PLITI</b> |     |      | <u> </u> |     | IMIT | TEE                | ONA  L  L  CODE |             |
| NTERNATIONAL  Mailing Address  |                        | 5959<br>LAKE | VARS    | ING E   | ENGIN<br>ES R  | OAD     |       | 17 P(              |              |     |      | <u> </u> |     | IMIT | TEE                |                 |             |
| NTERNATIONAL  Mailing Address  Relationship  | AFFILIAT               | 5959<br>LAKE | VARS    | ING E   | ENGIN<br>ES R  | OAD     |       |                    |              |     | L N) | <u> </u> |     | IMIT | TEE<br>1085        |                 |             |
| NTERNATIONAL  Mailing Address  Relationship  Type of Connected C                             | AFFILIAT Drganization: | 5959<br>LAKE | VARS    | ING E   | ENGIN<br>LES R | QAD TYA |       |                    |              |     | L N) | ///      | COM | 114  | TEE<br>1085<br>ZIP |                 |             |
| Name of Any Conn  NTERNATIONAL  Mailing Address  Relationship  Type of Connected Corporation | AFFILIAT Drganization: | 5959<br>LAKE | VARS    | ING E   | ENGIN<br>LES R | QAD TYA |       |                    |              |     | L N) | ///      |     | 114  | TEE<br>1085<br>ZIP |                 |             |

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| Designated Agent    |        |                  | [ ADDITIONAL ] |
|---------------------|--------|------------------|----------------|
| Full Name           |        |                  |                |
| Title or Position ▼ | CITY A |                  |                |
|                     |        | Telephone number |                |

| FEC Form 1 (Revised   | 1/2001)  | Page <b>25</b> / <b>79</b>              |
|---|--|---|
| Banks or Other Depositor<br>safety deposit boxes or mair<br>Name of Bank, Depository, 6 | ntains funds.                                      | funds, holds accounts, rents            |
| Name of Bank, Depository, e   | 510.   |   |
|   |  |   |
| Mailing Address   |  |   |
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|   | CITY ▲ STATE                                       | ZIP CODE 🛕                              |
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| Name of Any Connected   | Organization or Affiliated Committee               | [ ADDITIONAL ]                          |
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| POLITICAL EDUCATION   | ON PATTERNS, POLITICAL ARM INTL UNION OPERATING EI | NG LOCAL 18                             |
|   |  |   |
|   |  |   |
| Mailing Address   | 3515 PROSPECT AVENUE                               |   |
|   |  | <b>.</b>                                |
|   |  |   |
|   | CLEVELAND  | 44115                                   |
|   | CITY <b>≜</b> STATI                                | E ▲ ZIP CODE ▲                          |
|   |  |   |
| Relationship AFFI   | ILIATED  |   |
| Type of Connected Organiz   | ration:  |   |
| Corporation   | Corporation w/o Capital Stock                      | Labor Organization                      |
|   |  |   |
| Membership Orga   | nization Trade Association                         | Cooperative                             |

| Designated Agent    |        |                 | [ ADDITIONAL ] |
|---------------------|--------|-----------------|----------------|
| Full Name           |        |                 |                |
| •                   |        |                 |                |
| Title or Position ♥ | CITY A | STATE &         | ZIP CODE A     |
|                     | т      | elephone number |                |

| FEC Form 1 (Revi                                     | ised 1/2001)                                     | Page <b>27</b> / <b>79</b>      |
|--|--|---------------------------------|
| Banks or Other Depositions safety deposit boxes or m |  |                                 |
| Name of Bank, Depositor                              | ry, etc.   | [ ADDITIONAL ]                  |
| Mailing Address                                      |  |                                 |
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|  | 077  | 710,000                         |
|  | CITY 🛆 ST  | TATE A ZIP CODE A               |
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| Name of Any Connecte                                 | ed Organization or Affiliated Committee          | [ ADDITIONAL ]                  |
| L LOCAL 20 INTERNA                                   | ATIONAL LINION OF OPERATING ENGINEERS POLITICAL  | -                               |
| LOCAL 30 INTERNA                                     | ATIONAL UNION OF OPERATING ENGINEERS POLITICAL A | ACTION COMMITTEE                |
|  |  |                                 |
| Mailing Address                                      | 115-06 MYRTLE AVENUE                             |                                 |
|  | 1  |                                 |
|  | RICHMOND HILL                                    | NY     11418                    |
|  |  |                                 |
|  | CITY <b>≜</b> S                                  | TATE ▲ ZIP CODE ▲               |
| Relationship Al                                      | FFILIATED  |                                 |
|  |  |                                 |
| Type of Connected Orga                               | anization:                                       |                                 |
| Type of Connected Orga                               |  | 1                               |
| Type of Connected Orga  Corporation                  | anization:  Corporation w/o Capital Stock        | Labor Organization              |
|  | Corporation w/o Capital Stock                    | Labor Organization  Cooperative |

| Designated Agent    |        | [ ADDITIONAL ]  |
|---------------------|--------|-----------------|
| Full Name           |        |                 |
| Title or Position ▼ | CITY A |                 |
|                     | То     | elephone number |

| FEC Form 1 (Rev                                    | rised 1/2001)   | Page <b>29</b> / <b>79</b> |
|--|---|----------------------------|
| Banks or Other Deposi<br>safety deposit boxes or n |   |                            |
| Name of Bank, Depositor                            | ory, etc.   | [ ADDITIONAL ]             |
| Mailing Address                                    |   |                            |
| Walling Address                                    |   |                            |
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|  | CITY 🔼  | STATE  ZIP CODE  A         |
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| Name of Any Connect                                | tod Overeinstien or Affiliated Committee                        |                            |
| Name of Any Connect                                | ted Organization or Affiliated Committee                        | [ ADDITIONAL ]             |
| INTERNATIONAL U                                    | NION OF OPERATING ENGINEERS LOCAL 49 PAC IUOE I                 | LOCAL 49 PAC               |
| 1  |   | <b>.</b> .                 |
|  | 2829 ANTHONY LANE SOUTH   |                            |
| Mailing Address                                    |   |                            |
|  |   |                            |
|  | · MINISTAROLIO  |                            |
|  | MINNEAPOLIS   | MN55418                    |
|  |   | STATE A ZIP CODE A         |
|  | CITY  |                            |
| Relationship A                                     |   |                            |
| Relationship A                                     | CITY <b>≜</b>   |                            |
| Type of Connected Orga                             | CITY A  | STATE A ZIP CODE A         |
| Type of Connected Orga  Corporation                | CITY A  SFFILIATED  Inanization:  Corporation w/o Capital Stock |                            |
| Type of Connected Orga                             | CITY A  SFFILIATED  Inanization:  Corporation w/o Capital Stock | STATE A ZIP CODE A         |

| Designated Agent    |        | [ ADDITIONAL ]  |
|---------------------|--------|-----------------|
| Full Name           |        |                 |
| Title or Position ▼ | CITY & |                 |
|                     |        | elephone number |

|                              |   | [ ADDITIONAL ]                        |
|------------------------------|---|---------------------------------------|
|                              |   |                                       |
| Mailing Address              |   |                                       |
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| lame of Any Connected C      | Organization or Affiliated Committee            |                                       |
| •                            | 9   | [ ADDITIONAL ]                        |
|                              |   | [ ADDITIONAL ]                        |
|                              | N OF OPERATING ENGINEERS LOCAL 68 POLITICAL AC  |                                       |
|                              |   |                                       |
| NTERNATIONAL UNIO            |   |                                       |
| NTERNATIONAL UNIO            | ON OF OPERATING ENGINEERS LOCAL 68 POLITICAL AC |                                       |
| NTERNATIONAL UNIO            | N OF OPERATING ENGINEERS LOCAL 68 POLITICAL AC  | TION COMMITTEE                        |
| NTERNATIONAL UNIO            | N OF OPERATING ENGINEERS LOCAL 68 POLITICAL AC  |                                       |
| NTERNATIONAL UNIO            | N OF OPERATING ENGINEERS LOCAL 68 POLITICAL AC  | TION COMMITTEE                        |
| Mailing Address              | N OF OPERATING ENGINEERS LOCAL 68 POLITICAL AC  | TION COMMITTEE                        |
| Mailing Address              | N OF OPERATING ENGINEERS LOCAL 68 POLITICAL AC  | TION COMMITTEE  JJ 07006 _ ZIP CODE A |
| Mailing Address Relationship | NOF OPERATING ENGINEERS LOCAL 68 POLITICAL AC   | TION COMMITTEE  J J O7006  ZIP CODE   |
| NTERNATIONAL UNIO            | NOF OPERATING ENGINEERS LOCAL 68 POLITICAL AC   | TION COMMITTEE  J J O7006  ZIP CODE   |

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| Designated Agent    |        | [ ADDITIONAL ]  |
|---------------------|--------|-----------------|
| Full Name           |        |                 |
| Title or Position ▼ | CITY A |                 |
|                     | То     | elephone number |

|                               | с.  |                 | [ ADDITIONAL ]   |
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|                               |   |                 |                  |
| Mailing Address               |   |                 |                  |
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|                               | CITY 🗻  | STATE. <b>⊿</b> | ZIP CODE 🛕       |
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| Name of Any Connected O       | rganization or Affiliated Committee                             |                 |                  |
|                               |   |                 | [ ADDITIONAL 1   |
|                               |   |                 | [ ADDITIONAL ]   |
| OPERATING ENGINEER            | RS, LOCAL 98 SOCIAL ACTION FUND                                 |                 | [ ADDITIONAL ]   |
| OPERATING ENGINEER            | RS, LOCAL 98 SOCIAL ACTION FUND                                 |                 | [ ADDITIONAL ]   |
| OPERATING ENGINEER            |   |                 | [ ADDITIONAL ]   |
|                               | RS, LOCAL 98 SOCIAL ACTION FUND  2 CENTER SQUARE / P.O. BOX 217 |                 | [ ADDITIONAL ]   |
|                               |   |                 | [ ADDITIONAL ]   |
|                               | 2 CENTER SQUARE / P.O. BOX 217                                  |                 |                  |
|                               |   | MA              | [ ADDITIONAL ]   |
|                               | 2 CENTER SQUARE / P.O. BOX 217                                  | MA STATE A      |                  |
| Mailing Address               | 2 CENTER SQUARE / P.O. BOX 217  EAST LONGMEADOW  CITY           |                 | 01028   _ [      |
| Mailing Address               | 2 CENTER SQUARE / P.O. BOX 217  EAST LONGMEADOW                 | STATE A         | 01028   _ [      |
| Mailing Address  Relationship | 2 CENTER SQUARE / P.O. BOX 217  EAST LONGMEADOW  CITY           | STATE A         | 01028 ZIP CODE ▲ |
| Mailing Address  Relationship | 2 CENTER SQUARE / P.O. BOX 217  EAST LONGMEADOW  CITY           | STATE A         | 01028 ZIP CODE 🛦 |
| Mailing Address               | 2 CENTER SQUARE / P.O. BOX 217  EAST LONGMEADOW  CITY           | STATE A         | 01028 ZIP CODE 🛦 |

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| Designated Agent    |        |                 | [ ADDITIONAL ] |
|---------------------|--------|-----------------|----------------|
| Full Name           |        |                 |                |
| Title or Position ♥ | CITY A | STATE &         | ZIP CODE A     |
|                     |        | elephone number |                |

| safety deposit boxes or r<br>Name of Bank, Deposito                   |   |  |                 | [ ADDITIONAL ]  |
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| Mailing Address   |   |  |                 |                 |
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| Name of Any Company   | tod Oversijestion ov Affiliatod                 | Committee                                |                 |                 |
| Name of Any Connect   | ted Organization or Affiliated                  | Committee                                |                 | [ ADDITIONAL ]  |
|   |   |  |                 |                 |
|   |   | Committee                                |                 |                 |
|   |   |  |                 |                 |
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| INTERNATIONAL U   | INION OF OPERATING EI                           | NGINEERS LOCAL 99 COMM                   |                 |                 |
|   |   | NGINEERS LOCAL 99 COMM                   |                 |                 |
| INTERNATIONAL U   | INION OF OPERATING EI                           | NGINEERS LOCAL 99 COMM                   |                 |                 |
| INTERNATIONAL U   | 2461 WISCONSI                                   | NGINEERS LOCAL 99 COMM                   | ITTEE FOR POLIT | TICAL EDUCATION |
| INTERNATIONAL U   | INION OF OPERATING EI                           | NGINEERS LOCAL 99 COMM                   |                 |                 |
| INTERNATIONAL U   | 2461 WISCONSI                                   | NGINEERS LOCAL 99 COMM                   | ITTEE FOR POLIT | FICAL EDUCATION |
| INTERNATIONAL U   | 2461 WISCONSI                                   | NGINEERS LOCAL 99 COMM                   | INTEE FOR POLIT | CICAL EDUCATION |
| INTERNATIONAL U   | 2461 WISCONSI                                   | NGINEERS LOCAL 99 COMM                   | ITTEE FOR POLIT | FICAL EDUCATION |
| INTERNATIONAL U  Mailing Address                                      | 2461 WISCONSI WASHINGTON                        | NGINEERS LOCAL 99 COMM                   | INTEE FOR POLIT | CICAL EDUCATION |
| INTERNATIONAL U   | 2461 WISCONSI                                   | NGINEERS LOCAL 99 COMM                   | INTEE FOR POLIT | CICAL EDUCATION |
| INTERNATIONAL U  Mailing Address                                      | 2461 WISCONSI WASHINGTON                        | NGINEERS LOCAL 99 COMM                   | INTEE FOR POLIT | CICAL EDUCATION |
| INTERNATIONAL U  Mailing Address                                      | 2461 WISCONSI WASHINGTON                        | NGINEERS LOCAL 99 COMM                   | INTEE FOR POLIT | CICAL EDUCATION |
| INTERNATIONAL U  Mailing Address  Relationship  Type of Connected Org | 2461 WISCONSI WASHINGTON  FFILIATED             | NGINEERS LOCAL 99 COMN N AVENUE, NW CITY | DC STATE        | ZIP CODE        |
| INTERNATIONAL U  Mailing Address  Relationship                        | 2461 WISCONSI WASHINGTON  FFILIATED             | NGINEERS LOCAL 99 COMM                   | DC STATE        | CICAL EDUCATION |
| Mailing Address  Relationship  Type of Connected Org                  | 2461 WISCONSI WASHINGTON  FFILIATED  anization: | NGINEERS LOCAL 99 COMN N AVENUE, NW CITY | DC STATE        | ZIP CODE A      |

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| Designated Agent    |        | [ ADDITIONAL ]     |  |
|---------------------|--------|--------------------|--|
| Full Name           |        |                    |  |
| Walling Address     |        |                    |  |
| Title or Position ▼ | CITY A | STATE A ZIP CODE A |  |
|                     | Te     | elephone number    |  |

| Name of Any Connected Organization or Affiliated Committee  [ADDITIONAL INTERNATIONAL UNION OF OPERATING ENGINEERS - LOCAL 101 POLITICAL ACTION COMMITTEE]  Mailing Address    G601 WINCHESTER AVENUE - SUITE 280 | safety deposit bo<br>Name of Bank, D      |               |             |               |           |           |         |         |          | [ <b>A</b> l | DDITIC | NAL ]                                 |
|---|---|---------------|-------------|---------------|-----------|-----------|---------|---------|----------|--------------|--------|---------------------------------------|
| Name of Any Connected Organization or Affiliated Committee  [ADDITIONAL INTERNATIONAL UNION OF OPERATING ENGINEERS - LOCAL 101 POLITICAL ACTION COMMITTEE  Mailing Address  [ANSAS CITY MO 64133                  |   |               |             |               |           |           |         |         |          |              |        |                                       |
| Name of Any Connected Organization or Affiliated Committee  [ ADDITIONAL  NTERNATIONAL UNION OF OPERATING ENGINEERS - LOCAL 101 POLITICAL ACTION COMMITTEE  Mailing Address    6601 WINCHESTER AVENUE - SUITE 280 | Mailing Address                           |               |             |               |           |           |         |         |          |              |        |                                       |
| Name of Any Connected Organization or Affiliated Committee  [ ADDITIONAL  NTERNATIONAL UNION OF OPERATING ENGINEERS - LOCAL 101 POLITICAL ACTION COMMITTEE  Wailing Address    6601 WINCHESTER AVENUE - SUITE 280 |   |               |             |               |           |           |         |         | ш        |              |        |                                       |
| Name of Any Connected Organization or Affiliated Committee  [ ADDITIONAL  NTERNATIONAL UNION OF OPERATING ENGINEERS - LOCAL 101 POLITICAL ACTION COMMITTEE  Adding Address    6601 WINCHESTER AVENUE - SUITE 280  |   |               |             |               |           |           |         |         |          | Ш            |        | - L                                   |
| NTERNATIONAL UNION OF OPERATING ENGINEERS - LOCAL 101 POLITICAL ACTION COMMITTEE  Mailing Address  G601 WINCHESTER AVENUE - SUITE 280  KANSAS CITY  CITY  STATE  AFFILIATED  Type of Connected Organization:      |   |               |             |               | CITY 🛕    |           |         | STATE   | <b>4</b> |              | ZIP CO | DE 🛆                                  |
| TERNATIONAL UNION OF OPERATING ENGINEERS - LOCAL 101 POLITICAL ACTION COMMITTEE  Mailing Address  G601 WINCHESTER AVENUE - SUITE 280  KANSAS CITY  CITY  STATE  AFFILIATED  Type of Connected Organization:       |   |               |             |               |           |           |         |         |          |              |        |                                       |
| TERNATIONAL UNION OF OPERATING ENGINEERS - LOCAL 101 POLITICAL ACTION COMMITTEE  Mailing Address  G601 WINCHESTER AVENUE - SUITE 280  KANSAS CITY  CITY  STATE  AFFILIATED  Type of Connected Organization:       |   |               |             |               |           |           |         |         |          |              |        |                                       |
| TERNATIONAL UNION OF OPERATING ENGINEERS - LOCAL 101 POLITICAL ACTION COMMITTEE  Alailing Address  G601 WINCHESTER AVENUE - SUITE 280  KANSAS CITY  CITY  STATE  AFFILIATED  Type of Connected Organization:      |   |               |             |               |           |           |         |         |          |              |        |                                       |
| NTERNATIONAL UNION OF OPERATING ENGINEERS - LOCAL 101 POLITICAL ACTION COMMITTEE  Mailing Address    6601 WINCHESTER AVENUE - SUITE 280   |   |               |             |               |           |           |         |         |          |              |        |                                       |
| TERNATIONAL UNION OF OPERATING ENGINEERS - LOCAL 101 POLITICAL ACTION COMMITTEE  Alailing Address  G601 WINCHESTER AVENUE - SUITE 280  KANSAS CITY  CITY  STATE  AFFILIATED  Type of Connected Organization:      |   |               |             |               |           |           |         |         |          |              |        |                                       |
| TERNATIONAL UNION OF OPERATING ENGINEERS - LOCAL 101 POLITICAL ACTION COMMITTEE  Alailing Address  G601 WINCHESTER AVENUE - SUITE 280  KANSAS CITY  CITY  STATE  AFFILIATED  Type of Connected Organization:      |   |               |             |               |           |           |         |         |          |              |        |                                       |
| TERNATIONAL UNION OF OPERATING ENGINEERS - LOCAL 101 POLITICAL ACTION COMMITTEE  Mailing Address  G601 WINCHESTER AVENUE - SUITE 280  KANSAS CITY  CITY  STATE  AFFILIATED  Type of Connected Organization:       |   |               |             |               |           |           |         |         |          |              |        |                                       |
| NTERNATIONAL UNION OF OPERATING ENGINEERS - LOCAL 101 POLITICAL ACTION COMMITTEE  Mailing Address  G601 WINCHESTER AVENUE - SUITE 280  KANSAS CITY  CITY  STATE  AFFILIATED  Type of Connected Organization:      |   |               |             |               |           |           |         |         |          |              |        |                                       |
| TERNATIONAL UNION OF OPERATING ENGINEERS - LOCAL 101 POLITICAL ACTION COMMITTEE  Mailing Address    6601 WINCHESTER AVENUE - SUITE 280  |   |               |             |               |           |           |         |         |          |              |        |                                       |
| Aailing Address    6601 WINCHESTER AVENUE - SUITE 280   | lame of Any C                             | onnected Orga | anization c | or Affiliated | Committee |           |         |         |          | Γ ΔΙ         | DDITIC | NAL 1                                 |
| KANSAS CITY  CITY  STATE  AFFILIATED  Type of Connected Organization:   |   |               |             |               |           |           |         |         |          | _            |        | NAL ]                                 |
| KANSAS CITY  CITY  STATE  AFFILIATED  Type of Connected Organization:   |   |               |             |               |           | - LOCAL   | 101 POL | TICAL A | CTION    | _            |        | NAL ]                                 |
| KANSAS CITY  CITY  STATE  AFFILIATED  Type of Connected Organization:   |   |               |             |               |           | - LOCAL   | 101 POL | TICAL A | CTION    | _            |        | •NAL ]                                |
| CITY STATE A ZIP CODE A  Relationship AFFILIATED  Type of Connected Organization:   |   |               | OF OPER     | RATING EN     | IGINEERS  |           |         | TICAL A | CTION    | _            |        | • • • • • • • • • • • • • • • • • • • |
| CITY STATE ZIP CODE A  Relationship AFFILIATED  Type of Connected Organization:   | NTERNATION                                | NAL UNION (   | OF OPER     | RATING EN     | IGINEERS  |           |         | TICAL A | CTION    | _            |        | •NAL ]                                |
| CITY STATE A ZIP CODE A  Relationship AFFILIATED  Type of Connected Organization:   | NTERNATION                                | NAL UNION (   | OF OPER     | RATING EN     | IGINEERS  |           |         | TICAL A | CTION    | _            |        | •NAL ]                                |
| Relationship AFFILIATED  Type of Connected Organization:  | ITERNATION                                | NAL UNION (   | OF OPER     | RATING EN     | IGINEERS  |           |         |         |          | COM          | MITTEE | •NAL ]                                |
| Relationship AFFILIATED  Type of Connected Organization:  | NTERNATION                                | NAL UNION (   | OF OPER     | RATING EN     | IGINEERS  |           |         |         |          | COM          | MITTEE | • • • • • • • • • • • • • • • • • • • |
| Type of Connected Organization:   | NTERNATION                                | NAL UNION (   | OF OPER     | RATING EN     | ER AVENU  |           |         | MC      |          | COM          | MITTEE | -<br>-<br>-<br>-<br>-                 |
|   | NTERNATION                                | NAL UNION (   | OF OPER     | RATING EN     | ER AVENU  |           |         | MC      |          | COM          | MITTEE | -<br>-<br>-<br>-<br>-                 |
|   | Mailing Address                           | NAL UNION (   | OF OPER     | RATING EN     | ER AVENU  | E - SUITE | 280     | MC      |          | COM          | MITTEE | — — — — — — — — — — — — — — — — — — — |
| Corneration w/o Conital Stock   | Mailing Address                           | AFFILIA       | OF OPER     | RATING EN     | ER AVENU  | E - SUITE | 280     | MC      |          | COM          | MITTEE | — — — — — — — — — — — — — — — — — — — |
| Corporation Corporation W/o Capital Stock Labor Ordanization  | Mailing Address                           | AFFILIA       | OF OPER     | RATING EN     | ER AVENU  | E - SUITE | 280     | MC      |          | COM          | MITTEE | — — — — — — — — — — — — — — — — — — — |
| Membership Organization Trade Association Cooperative   | NTERNATION  Mailing Address  Relationship | AFFILIA       | OF OPER     | AS CITY       | ER AVENU  | E - SUITE | 280     | MC      |          | COM          | MITTEE | — — — — — — — — — — — — — — — — — — — |

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| Designated Agent    |        | [ ADDITIONAL ]      | ] |
|---------------------|--------|---------------------|---|
| Full Name           |        |                     |   |
| Mailing Address     |        |                     |   |
| Title or Position ▼ | CITY A | STATE A ZIP CODE A  |   |
|                     |        | elephone number = = |   |

| safety deposit box<br>Name of Bank, De                      |              |              |              |          |              |         |      |         |             |     |      |                | [ | ADI   | DITIC                | ANC        | L]   |
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| Mailing Address   |              |              |              |          |              |         |      |         |             |     |      |                |   |       |                      |            |      |
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| Name of Any Co  | onnected Org | anizatio     | on or        | Affiliat | ed Co        | mmittee |      |         |             |     |      |                |   | ADI   | DITIC                | ONA        | .L]  |
|   |              |              |              |          |              |         |      | Ļ 103 \ | VOLU        | NŢA | ŖY,F | PQL[1          |   |       |                      |            | _    |
|   |              |              |              |          |              |         |      | L 103 ' | VOLU        | NTA | RY F | POLIT          |   |       |                      |            | _    |
| NTERNATION  |              | OF OF        | PERA         | TING     | ENGI         | NEERS   |      | L 103 \ | YOLU        | NTA | RY F | POLIT          |   |       |                      |            | _    |
| NTERNATION  |              | OF OF        | PERA         |          | ENGI         | NEERS   |      | L 103 \ | <b>VOLU</b> | NTA | RY,F | POLIT          |   |       |                      |            | _    |
| NTERNATION  |              | OF OF        | PERA         | TING     | ENGI         | NEERS   |      | L 103 \ | YOLU        | NTA | RY,F | P <b>QLI</b> 1 |   |       |                      |            | _    |
| NTERNATION  |              | 0F 0F        | PERA<br>5 HA | TING     | ENGI<br>ROAL | NEERS   |      | L 103 \ | YOLU        | NTA | RY F |                |   | - EDI |                      |            | _    |
| NTERNATION  |              | 0F 0F        | PERA<br>5 HA | TING     | ROAL         | NEERS   |      | L 103 \ | YOLU        |     |      |                |   | - EDI | JCAT                 | ION  I - L | FUNI |
| NTERNATION  Mailing Address                                 |              | OF OF OF 353 | PERA<br>5 HA | TING     | ROAL         | NEERS   | LOCA | L 103 \ |             |     | L IN |                |   | _ EDI | JCAT                 | ION  I - L | FUNI |
| NTERNATION  Mailing Address  Relationship                   | AFFILIA      | OF OF OF 353 | PERA<br>5 HA | TING     | ROAL         | NEERS   | LOCA |         |             |     | LIN  |                |   | _ EDI | JCAT<br>808<br>ZIP C | ION        | FUNI |
| NTERNATION  Mailing Address  Relationship  Type of Connecte | AFFILIA      | OF OF OF 353 | PERA<br>5 HA | TING     | ROAL         | NEERS   | LOCA |         |             |     | LIN  | E A            |   | 46    | JCAT<br>808<br>ZIP C | ION        | FUNI |
| Name of Any Co  | AFFILIA      | OF OF OF 353 | PERA<br>5 HA | TING     | ROAL         | NEERS   | LOCA |         |             |     | LIN  | E A            |   | 46    | JCAT<br>808<br>ZIP C | ION        | FUNI |

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| Designated Agent    |        | [ ADDITIONAL ]      |   |
|---------------------|--------|---------------------|---|
| Full Name           |        |                     | Ш |
| Walling Address     |        |                     |   |
| Title or Position ▼ | CITY A | STATE▲ ZIP CODE ▲   |   |
|                     | Tel    | elephone number = = |   |

| afety deposit boxes<br>lame of Bank, Dep  |                      |                     |            |           |       |          |          |                   | [ A    | DDITIO   | NAL J |
|---|----------------------|---------------------|------------|-----------|-------|----------|----------|-------------------|--------|----------|-------|
|   |                      |                     |            |           |       |          |          |                   |        |          |       |
| lailing Address   |                      |                     |            |           |       |          |          |                   |        |          |       |
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| lame of Any Con   | nected Orga          | nization or A       | Affiliated | Committee |       |          |          |                   | [ A    | DDITIO   | NAL]  |
|   |                      |                     |            |           |       | 106 YOUN | ITARY PO | DLITIC            | _      |          | _     |
|   |                      |                     |            |           |       | 106 YOUN | ITARY PO | PLITIC            | _      |          | _     |
| NTERNATIONA   |                      |                     | TING EI    | NGINEERS  |       | 106 YOUN | ITARY PC | <b>DLITIC</b>     | _      |          | _     |
| NTERNATIONA   |                      | OF OPERA            | TING EI    | NGINEERS  |       | 106 YOUN | ITARY PC | <b>PLITIC</b>     | _      |          | _     |
| NTERNATIONA   |                      | OF OPERA            | TING EI    | NGINEERS  |       | 106 YOUN | ITARY PC |                   | CAL AC |          | _     |
| NTERNATIONA   |                      | OF OPERA<br>44 HANN | TING EI    | NGINEERS  |       | 106 YOUN |          |                   | CAL AC | CTION FL | JND   |
| Mailing Address   |                      | 44 HANN<br>GLENMC   | TING EI    | NGINEERS  | LOCAL | 106 YOUN | NY       |                   | CAL AC | TION FL  | JND   |
| ATERNATIONA  Mailing Address  Relationship  | AFFILIA              | 44 HANN GLENMC      | TING EI    | NGINEERS  | LOCAL |          | NY       |                   | CAL AC | 12077    | JND   |
| Name of Any Con  NTERNATIONA  Mailing Address  Relationship  Type of Connected  Corporation | AFFILIA Organization | 44 HANN GLENMC      | TING EI    | NGINEERS  | LOCAL |          | NY       |                   | CAL AC | 12077    | JND   |

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| Designated Agent    |        | [ ADDITIONAL ]  |
|---------------------|--------|-----------------|
| Full Name           |        |                 |
| Title or Position ▼ | CITY A |                 |
|                     | То     | elephone number |

|   | ised 1/2001)  | Page <b>43</b> / <b>79</b> |
|---|---|----------------------------|
| Banks or Other Deposit<br>safety deposit boxes or m |   |                            |
| Name of Bank, Depositor                             | ry, etc.  | [ ADDITIONAL ]             |
|   |   |                            |
| Mailing Address                                     |   |                            |
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|   | CITY  STAT  | TE ZIP CODE A              |
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| Name of Any Connecte                                | ed Organization or Affiliated Committee   | [ ADDITIONAL ]             |
| INTERNATIONAL UI                                    | NION OF OPERATING ENGINEERS - LOCAL 137 PAC                                       |                            |
|   |   |                            |
|   |   |                            |
| Mailing Address                                     | 1360 PLEASANTVILLE ROAD   |                            |
| Mailing Address                                     |   |                            |
| Mailing Address                                     |   |                            |
| Mailing Address                                     |   | Y 10510 _                  |
| Mailing Address                                     | BRIARCLIFF MANOR  |                            |
|   | BRIARCLIFF MANOR N  | Y 10510 _                  |
|   | BRIARCLIFF MANOR N CITY STA   | Y 10510 _                  |
| Relationship AF                                     | BRIARCLIFF MANOR N CITY STA   | Y 10510 _                  |
| Relationship AF                                     | BRIARCLIFF MANOR  CITY  STA  FFILIATED  anization:  Corporation w/o Capital Stock | TE ZIP CODE A              |

| Designated Agent    |        | [ ADDITIONAL ]  |
|---------------------|--------|-----------------|
| Full Name           |        |                 |
| Title or Position ▼ | CITY A |                 |
|                     | То     | elephone number |

| FEC Form 1 (Revis  | sed 1/2001)                 |                                      |                     | Page <b>45</b> / <b>79</b> |
|--|-----------------------------|--------------------------------------|---------------------|----------------------------|
| Banks or Other Deposit<br>safety deposit boxes or m<br>Name of Bank, Depositor | aintains funds.             | other depositories in which the comm |                     | ccounts, rents             |
|  |                             |                                      |                     |                            |
| Mailing Address  |                             |                                      |                     |                            |
|  |                             |                                      |                     |                            |
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|  |                             | CITY 🗖                               | STATE <b>△</b>      | ZIP CODE 🛕                 |
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| Name of Any Connected  | ed Organization or Affiliat | ed Committee                         | [ A                 | DDITIONAL ]                |
| LOCAL 138 138A &   | 138B INTERNATIONAI          | L ŲNĮOŅ OF OPERATING ENG             | GINEERS POLITIÇAL A | CTION FUND-FED             |
|  |                             |                                      |                     |                            |
| Mailing Address  | P.O. BOX 206                | / 137 GAZZA BOULEVARD                |                     |                            |
| Mailing Address  |                             |                                      |                     |                            |
|  | FARMINGDAL                  | E, , , , , , , , , , , ,             | NY     , ,          | 11735                      |
|  |                             | CITY▲                                | STATE A             | ZIP CODE 🛦                 |
|  |                             | CITT                                 | SIAIE               | ZIF CODE A                 |
| Relationship AF  | FILIATED                    |                                      |                     |                            |
| Type of Connected Orga   | nization:                   |                                      |                     |                            |
| Corporation  |                             | Corporation w/o Capital Stock        | Labor Organi        | zation                     |
| Membership Or  | ganization                  | Trade Association                    | Cooperative         |                            |
|  |                             |                                      |                     |                            |

| Designated Agent    |        | [ ADDITIONAL ]      |   |
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| Full Name           |        |                     | Ш |
| Walling Address     |        |                     |   |
| Title or Position ▼ | CITY A | STATE▲ ZIP CODE ▲   |   |
|                     | Tel    | elephone number = = |   |

| safety deposit boxes<br>Name of Bank, Depo   |                       |           |                    |                 |         |          |                     |          |        | [ A  | DDITIC       | NAL J                                 |
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| L  |                       |           |                    |                 |         |          |                     |          |        |      |              |                                       |
| Mailing Address  |                       |           |                    |                 |         |          |                     |          |        |      |              |                                       |
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|  |                       |           |                    |                 |         |          | Ш                   |          |        | ш    |              |                                       |
|  |                       |           |                    | CITY 4          | 3       |          |                     | STATE    | 4      |      | ZIP CO       | DE 🛆                                  |
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|  |                       |           |                    |                 |         | L 150 PC | DLITIC,             | AL ACT   | TION ( |      | DDITIC       | DNAL ]                                |
|  |                       |           |                    |                 |         | L 150 PC | DLITIC,             | AL ACT   | TION ( |      |              | <b>DNAL ]</b>                         |
| NTERNATIONA  |                       | PF OPE    |                    | ENGINEE         |         | L 150 PC | DLITIC,             | AL ACT   | ION (  |      |              | <b>DNAL ]</b>                         |
| NTERNATIONA  |                       | PF OPE    | RATING             | ENGINEE         |         | L 150 P( | DLITIC,             | AL ACT   | TION ( |      |              | DNAL ]                                |
| NTERNATIONA  |                       | 6200 C    | RATING             | ENGINEE         |         | L 150 PC | DLITIC <sub>1</sub> | AL ACT   |        | COMN |              | ONAL ]                                |
| NTERNATIONA  |                       | 6200 C    | RATING<br>JOLIET R | ENGINEE         | RS LOCA | L 150 PC | DLITIC,             |          |        | COMN | 60525        | DNAL]                                 |
| NTERNATIONA  Mailing Address   |                       | 6200 COUN | RATING<br>JOLIET R | ENGINEE<br>OAD  | RS LOCA | L 150 PC |                     | <u> </u> |        | COMN | 60525 J      |                                       |
| NTERNATIONA  Mailing Address  Relationship   | L UNION O             | 6200 COUN | RATING<br>JOLIET R | ENGINEE<br>OAD  | RS LOCA |          |                     | IL STATE |        | COMM | 60525 J      | — — — — — — — — — — — — — — — — — — — |
| Name of Any Cons  NTERNATIONA  Mailing Address  Relationship  Type of Connected  Corporation | AFFILIATOrganization: | 6200 COUN | RATING<br>JOLIET R | ENGINEE<br>COAD | RS LOCA |          |                     | IL STATE |        | COMM | 60525 ZIP CO | — — — — — — — — — — — — — — — — — — — |

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| Designated Agent    |        | [ ADDITIONAL ]  |
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| Full Name           |        |                 |
| Title or Position ▼ | CITY & |                 |
|                     |        | elephone number |

|                        | CITY 4                               | STATE 4  | ZIP CODE A  |
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| anization or Affiliate | d Committee                          |  | [ ADDITIONAL ]                                    |
| DE ODEDATING I         | ENCINEEDS LOCAL #00                  | O VOLUNTARY ROLLT  | ICAL FUND   |
| OF OPERATING           | ENGINEERS LOCAL #30                  | 2 VOLUNIARY POLII  | ICAL FUND   |
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| BOTHELL                |                                      |  | 98011   |
| BOTHELL                |                                      | <u> </u>   | 98011   |
| BOTHELL                | CITY                                 | . WA STATE ▲   | 98011 ZIP CODE 🛦                                  |
| BOTHELL                | CITY                                 |  |   |
| BOTHELL                | CITY <b>A</b>                        |  |   |
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|                        | CITYA                                |  |   |
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| TED                    | CITY L  Corporation w/o Capital Stoc | STATE A  |   |
|                        | OF OPERATING E                       | nnization or Affiliated Committee  OF OPERATING ENGINEERS LOCAL #302 | OF OPERATING ENGINEERS LOCAL #302 VOLUNTARY POLIT |

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| Designated Agent    |        | [ ADDITIONAL ]  |
|---------------------|--------|-----------------|
| Full Name           |        |                 |
| Title or Position ▼ | CITY A |                 |
|                     | То     | elephone number |

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|---|---|----------------------------------|
| Banks or Other Depositor safety deposit boxes or main |   |                                  |
| Name of Bank, Depository,                             | etc.                                      | [ ADDITIONAL ]                   |
|   |   |                                  |
| Mailing Address                                       |   |                                  |
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|   | CITY 🗖                                    | STATE ZIP CODE A                 |
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| Name of Any Connected                                 | Organization or Affiliated Committee      | I ADDITIONAL I                   |
| ,   | •   | [ ADDITIONAL ]                   |
| INTERNATIONAL UNIC                                    | ON OF OPERATING ENGINEERS LOCAL 324 NATIO | NAL POLITICAL ACTIVITIES COMMITT |
|   |   |                                  |
| Mailing Address                                       | 37450 SCHOOLCRAFT ROAD SUITE 110          |                                  |
| Mailing Address                                       |   |                                  |
|   |   |                                  |
|   | LIVONIA                                   | MI 48150                         |
|   | CITY                                      | STATE ▲ ZIP CODE ▲               |
| Relationship   AFF                                    | ILIATED                                   |                                  |
|   |   |                                  |
| Type of Connected Organiz                             |   |                                  |
| Corporation   | Corporation w/o Capital Stock             | Labor Organization               |
| Membership Orga                                       | nization Trade Association                | Cooperative                      |

| Designated Agent                  |        |                 | [ ADDITIONAL ] |
|-----------------------------------|--------|-----------------|----------------|
| Full Name LILILI  Mailing Address |        |                 |                |
| Title or Position ▼               | CITY A |                 | ZIP CODE A     |
|                                   | Те     | elephone number |                |

| safety deposit boxes<br>Name of Bank, Dep   |                      |             |          |          |      |        |           |  |   |                                       |           | l         | [ AC         | DIT         | ION  | AL]         |
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| L   |                      |             |          |          |      |        |           |  |   |                                       |           |           |              |             |      |             |
| Mailing Address   |                      |             |          |          |      |        |           |  |   |                                       |           | ш         |              |             |      |             |
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|   |                      |             |          |          | CITY | ΄ Δ    |           |  | ; | STAT                                  | E <b></b> |           |              | ZIP (       | CODE | Δ           |
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|   |                      |             |          |          |      |        |           |  |   |                                       |           |           |              |             |      |             |
|   |                      |             |          |          |      |        |           |  |   |                                       |           |           |              |             |      |             |
|   |                      |             |          |          |      |        |           |  |   |                                       |           |           |              |             |      |             |
|   |                      |             |          |          |      |        |           |  |   |                                       |           |           |              |             |      |             |
|   |                      |             |          |          |      |        |           |  |   |                                       |           |           |              |             |      |             |
|   |                      |             |          |          |      |        |           |  |   |                                       |           |           |              |             |      |             |
| Name of Any Con   | nected Orga          | nizatio     | n or Aff | filiated | Comn | nittee |           |  |   |                                       |           |           | - AE         | DIT         | ION  | AL 1        |
|   |                      | nizatio     | n or Aff | filiated | Comn | nittee |           |  |   |                                       |           |           | [ <b>A</b> E | DIT         | ION  | AL]         |
|   |                      | nizatio     | n or Aff | filiated | Comn | nittee |           |  |   |                                       |           |           | [ <b>A</b> C | DIT         | ION  | <b>AL</b> ] |
|   |                      | nizatio     | n or Aff | filiated | Comn | nittee |           |  |   |                                       |           |           | [ <b>A</b> C | DIT         | IONA | AL]         |
|   |                      |             |          |          |      | nittee |           |  |   | 1 1                                   |           |           | [ <b>A</b> E | DIT         | IONA | <b>AL ]</b> |
| UOE LOCAL 46  |                      |             | n or Aff |          |      | nittee |           |  |   |                                       |           | <br> <br> | [ <b>A</b> [ | DOIT        | IONA | <b>AL ]</b> |
| UOE LOCAL 46  |                      |             |          |          |      | nittee |           |  |   |                                       |           | <br>      | [ <b>AC</b>  | DOIT        | ION  | <b>AL ]</b> |
| UOE LOCAL 46  |                      | 3365        | RIDG     | E ROA    |      | nittee |           |  |   |                                       |           |           |              |             | IONA | <b>AL ]</b> |
| UOE LOCAL 46  |                      | 3365        |          | E ROA    |      | nittee |           |  |   |                                       |           |           |              | DDIT        | ION/ | AL ]        |
| UOE LOCAL 46  |                      | 3365        | RIDG     | E ROA    | AD   |        |           |  |   |                                       | _         |           |              | 4131        |      |             |
| UOE LOCAL 46  |                      | 3365        | RIDG     | E ROA    |      |        |           |  |   | ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ | _         |           |              | 4131        | ION/ |             |
| UOE LOCAL 46  Mailing Address   | 3 PAC                | 3365<br>RAN | RIDG     | E ROA    | AD   |        |           |  |   | STAT                                  | _         |           |              | 4131<br>ZIP |      |             |
| UOE LOCAL 46  Mailing Address   |                      | 3365<br>RAN | RIDG     | E ROA    | AD   |        |           |  |   |                                       | _         |           |              | 4131<br>ZIP |      |             |
| UOE LOCAL 46  Mailing Address  Relationship   | AFFILIA              | 3365<br>RAN | RIDG     | E ROA    | AD   |        |           |  |   | STAT                                  | _         |           |              | 4131<br>ZIP |      |             |
| UOE LOCAL 46  Mailing Address  Relationship  Type of Connected                                | AFFILIA Organization | 3365<br>RAN | RIDG     | E ROA    | AD   | Y.     |           |  |   | STAT                                  |           |           | 1            | 4131<br>ZIP |      |             |
| Name of Any Con  IUOE LOCAL 46  Mailing Address  Relationship  Type of Connected  Corporation | AFFILIA Organization | 3365<br>RAN | RIDG     | E ROA    | AD   | Y.     | /o Capita |  |   | STAT                                  |           |           | 1            | 4131<br>ZIP |      |             |

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| Designated Agent                  |        |                 | [ ADDITIONAL ] |
|-----------------------------------|--------|-----------------|----------------|
| Full Name LILILI  Mailing Address |        |                 |                |
| Title or Position ♥               | CITY A | STATE           |                |
|                                   |        | elephone number |                |

| FEC Form 1 (Revise   | ed 1/2001)                               | Page <b>55</b> / <b>79</b>                                |
|--|--|---|
| Banks or Other Deposito<br>safety deposit boxes or ma<br>Name of Bank, Depository, | aintains funds.                          | tee deposits funds, holds accounts, rents  [ ADDITIONAL ] |
|  |  |   |
| Mailing Address  |  |   |
|  |  |   |
|  |  |   |
|  | CITY 🛕                                   | STATE ▲ ZIP CODE ▲  |
|  |  |   |
|  | d Organization or Affiliated Committee   | [ ADDITIONAL ]  |
| OPERATING ENGINE   | ENS LOCAL 470 POLITICAL ACTION COMMITTEE |   |
| Mailing Address  | 1965 DIXWELL AVENUE                      |   |
|  | HAMDEN                                   | CT 06514 _  |
|  | CITY▲                                    | STATE ♣ ZIP CODE ♠  |
| Relationship AFI   | FILIATED                                 |   |
| Type of Connected Organ  | ization:                                 |   |
| Corporation  | Corporation w/o Capital Stock            | Labor Organization  |
| Membership Org   | ganization Trade Association             | Cooperative   |

| Designated Agent    |        | [ ADDITIONAL ]      | ] |
|---------------------|--------|---------------------|---|
| Full Name           |        |                     |   |
| Mailing Address     |        |                     |   |
| Title or Position ▼ | CITY A | STATE A ZIP CODE A  |   |
|                     |        | elephone number = = |   |

| safety deposit boxes or m<br>Name of Bank, Depositor |                          |                         |                | [ ADDITIONAL ] |
|--|--------------------------|-------------------------|----------------|----------------|
|  |                          |                         |                |                |
| lailing Address                                      |                          |                         |                |                |
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|  |                          | CITY 🗖                  | STATE <b>⊿</b> | ZIP CODE 🛕     |
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|  |                          |                         |                |                |
| Name of Any Connecte                                 | ed Organization or Affil | liated Committee        |                | [ ADDITIONAL ] |
|  |                          | liated Committee        | . 487          | [ ADDITIONAL ] |
|  |                          |                         | 487            | [ ADDITIONAL ] |
| AC - INTERNATION                                     |                          | RATING ENGINEERS, LOCAL | 487            | [ ADDITIONAL ] |
| AC - INTERNATION                                     | NAL UNION OF OPE         | RATING ENGINEERS, LOCAL | 487            | [ ADDITIONAL ] |
| AC - INTERNATION                                     | NAL UNION OF OPE         | RATING ENGINEERS, LOCAL | . 487          | [ ADDITIONAL ] |
| AC - INTERNATION                                     | 1425 NW 36               | RATING ENGINEERS, LOCAL |                |                |
| PAC - INTERNATION Mailing Address                    | 1425 NW 36               | TH STREET               | FL STATE A     | 33142          |
| PAC - INTERNATION  Mailing Address  Relationship     | 1425 NW 36               | TH STREET  CITY         | FL STATE A     | 33142 L        |
| Mailing Address                                      | 1425 NW 36               | TH STREET  CITY         | FL STATE A     | 33142 L        |

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| Designated Agent    |        |                 | [ ADDITIONAL ] |
|---------------------|--------|-----------------|----------------|
| Full Name           |        |                 |                |
| Title or Position ♥ | CITY A | STATE &         | ZIP CODE A     |
|                     |        | elephone number |                |

|                         |                            |            | [.      | ADDITIONAL ]     |
|-------------------------|----------------------------|------------|---------|------------------|
|                         |                            |            |         |                  |
| Mailing Address         |                            |            |         |                  |
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|                         |                            | CITY 🙇     | STATE 4 | ZIP CODE 🛕       |
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|                         |                            |            |         |                  |
| Name of Any Connected ( | Organization or Affiliated | Committee  | -       | ADDITIONAL 1     |
| name of Any Connected ( | rigamization of Anniated   |            | L.      | ADDITIONAL ]     |
| UOE OPERATING EN        | INFERS                     |            |         |                  |
|                         |                            |            |         |                  |
|                         |                            |            |         |                  |
|                         |                            |            |         |                  |
|                         |                            |            |         |                  |
| Mailing Address         | 1375 VIRGINIA I            | PRIVE      |         |                  |
| Mailing Address         | 1375 VIRGINIA I            | PRIVE      |         |                  |
| Mailing Address         |                            |            |         |                  |
|                         | 1375 VIRGINIA D            |            | PA      | 19034            |
| Mailing Address         |                            |            | PA L    | 19034   _        |
| Mailing Address         |                            |            | PA L    | 19034 ZIP CODE A |
| Mailing Address         |                            | TON        |         |                  |
| . AEEI                  |                            | TON CITY & | STATE A | ZIP CODE 🛦       |
|                         | FORTWASHING                | TON        |         | ZIP CODE 🛦       |
| . AEEI                  | FORT WASHING               | TON CITY & | STATE A | ZIP CODE 🛦       |
| Relationship AFFI       | FORT WASHING               | TON CITY & | STATE A | ZIP CODE 🛦       |

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| Designated Agent    |        | [ ADDITIONAL ]  |
|---------------------|--------|-----------------|
| Full Name           |        |                 |
| Title or Position ▼ | CITY A |                 |
|                     | То     | elephone number |

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|---|--|--------------------------------|
| Banks or Other Deposit<br>safety deposit boxes or m |  |                                |
| Name of Bank, Depositor                             | y, etc.                                      | [ ADDITIONAL ]                 |
| Mailing Address                                     |  |                                |
| Mailing Address                                     |  |                                |
|   |  |                                |
|   |  |                                |
|   | CITY 🗖                                       | STATE ZIP CODE A               |
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|   |  |                                |
| Name of Any Connecte                                | ed Organization or Affiliated Committee      | [ ADDITIONAL ]                 |
|   |  |                                |
| INTERNATIONAL UN                                    | NION OF OPERATING ENGINEERS, LOCAL 545, 545C | AND 545D VOLUNTARY PAC         |
| 1   |  |                                |
|   | 127 EAST GLEN AVENUE                         |                                |
| Mailing Address                                     |  |                                |
|   |  |                                |
|   | SYRACUSE                                     | NY     13205   _               |
|   |  |                                |
|   | CITY▲  | STATE ▲ ZIP CODE ▲             |
| Relationship AF                                     | FFILIATED                                    |                                |
| Type of Connected Orga                              |  |                                |
| Type of Confidence Orga                             | anization:                                   |                                |
|   |  | Labor Oversaination            |
| Corporation   | Corporation w/o Capital Stock                | Labor Organization             |
|   | Corporation w/o Capital Stock                | Labor Organization Cooperative |

| Designated Agent    |        | [ ADDITIONAL ]      |   |
|---------------------|--------|---------------------|---|
| Full Name           |        |                     | Ш |
| Walling Address     |        |                     |   |
| Title or Position ▼ | CITY A | STATE▲ ZIP CODE ▲   |   |
|                     | Tel    | elephone number = = |   |

| safety deposit box<br>Name of Bank, De                        |              |                |                  |                     |                       |             | [ ADD         | DITIONAL ]     |
|---|--------------|----------------|------------------|---------------------|-----------------------|-------------|---------------|----------------|
|   |              |                |                  |                     | 1 1 1 1 1             |             |               |                |
| Mailing Address   |              |                | 1 1 1            |                     |                       |             |               |                |
|   |              |                | 1 1 1            | 1 1 1 1             |                       |             |               |                |
|   |              |                | 1 1 1            | 1 1 1 1             |                       |             |               | _  -           |
|   |              |                |                  | CITY                | 4                     | STATE       | <b>Δ</b> Ζ    | IP CODE 🛕      |
|   |              |                |                  |                     |                       |             |               |                |
|   |              |                |                  |                     |                       |             |               |                |
|   |              |                |                  |                     |                       |             |               |                |
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|   |              |                |                  |                     |                       |             |               |                |
|   |              |                |                  |                     |                       |             |               |                |
|   |              |                |                  |                     |                       |             |               |                |
|   |              |                |                  |                     |                       |             |               |                |
|   |              |                |                  |                     |                       |             |               |                |
| Name of Any Co  | onnected Org | ganizatio      | n or Affilia     | ated Commit         | itee                  |             |               | DITIONAL 1     |
|   |              |                |                  |                     |                       | FEDERAL PAC | [ ADE         | DITIONAL ]     |
|   |              |                |                  |                     | itee<br>ERS LOCAL 547 | FEDERAL PAC | <b>[ AD</b> E | DITIONAL ]     |
|   |              |                |                  |                     |                       | FEDERAL PAC | [ <b>AD</b> E | DITIONAL ]     |
|   |              | OF OP          | ERATINO          |                     | ERS LOCAL 547         | FEDERAL PAC | [ ADE         | DITIONAL ]     |
| INTERNATION   |              | OF OP          | ERATINO          | G ENGINEE           | ERS LOCAL 547         | FEDERAL PAC | [ ADE         | DITIONAL ]     |
| INTERNATION   |              | OF OP          | ERATINO  0 W SEV | G ENGINEE           | ERS LOCAL 547         | FEDERAL PAC |               | DITIONAL ]     |
| INTERNATION   |              | 2427           | ERATINO  0 W SEV | ENGINEE             | ROAD                  |             | 482           | 219            |
| INTERNATION   |              | 2427           | ERATINO  0 W SEV | G ENGINEE           | ROAD                  |             | 482           |                |
| INTERNATION   |              | 2427<br>  DETI | ERATINO  0 W SEV | ENGINEE             | ROAD                  |             | 482           | 219            |
| INTERNATION  Mailing Address                                  | AFFILI       | OF OPI         | ERATINO  0 W SEV | ENGINEE             | ROAD                  | STATI       | 482           | 219            |
| INTERNATION  Mailing Address  Relationship  Type of Connector | AFFILI.      | OF OPI         | ERATINO  0 W SEV | ENGINEE  /EN MILE F | ROAD                  | STATI       | 482           | 219 ZIP CODE _ |
| Relationship  Type of Connecte  Corporat                      | AFFILI.      | OF OPI         | ERATINO  0 W SEV | CITYA               | ROAD                  | STATI       | 482           | 219 ZIP CODE _ |

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| Designated Agent    |        | [ ADDITIONAL ]  |
|---------------------|--------|-----------------|
| Full Name           |        |                 |
| Title or Position ▼ | CITY A |                 |
|                     | То     | elephone number |

| safety deposit boxes o<br>Name of Bank, Depos   |               |                         |                  |              |                    | [ ADD        | ITIONAL ]                              |
|---|---------------|-------------------------|------------------|--------------|--------------------|--------------|--|
|   |               |                         |                  |              |                    |              |  |
| Mailing Address   |               |                         |                  |              |                    |              |  |
|   |               |                         |                  |              |                    |              |  |
|   |               |                         |                  |              |                    |              |  |
|   |               |                         | CITY 🗖           |              | STATE              | <b>⊿</b> ZI  | P CODE A                               |
|   |               |                         |                  |              |                    |              |  |
|   |               |                         |                  |              |                    |              |  |
|   |               |                         |                  |              |                    |              |  |
| Name of Any Conne   | ected Organiz | zation or Affi          | liated Committee | 1            |                    | [ ADD        | ITIONAL ]                              |
|   |               |                         |                  |              | <b>TEE</b> , , , , | [ <b>ADD</b> | ITIONAL ]                              |
|   |               |                         |                  |              | <b>TEE</b>         | [ <b>ADD</b> | ITIONAL ]                              |
| PPERATING ENG   | INEERS LO     | DCAL #649               |                  |              | TEE.               | [ ADD        | ITIONAL ]                              |
| PPERATING ENG   | INEERS LO     | DCAL #649               | POLITICAL AC     |              | TEE                | [ ADD        | ITIONAL ]                              |
| DPERATING ENG   | INEERS LO     | DCAL #649               | POLITICAL AC     |              | TEE                | [ ADD        |  |
| DPERATING ENG   | INEERS LO     | OCAL #649<br>6408 W. PL | POLITICAL AC     |              |                    | 6166         |  |
| DPERATING ENG  Mailing Address  | INEERS LO     | OCAL #649<br>6408 W. PL | POLITICAL AC     |              | STATE              | 6160<br>EA Z | 04   -                                 |
| DPERATING ENG  Wailing Address  Relationship  | AFFILIATE     | OCAL #649<br>6408 W. PL | POLITICAL AC     | CTION COMMIT | STATE              | 6160<br>EA Z | 04                                     |
| Name of Any Conne  OPERATING ENG  Mailing Address  Relationship  Type of Connected O  Corporation | AFFILIATE     | OCAL #649<br>6408 W. PL | POLITICAL AC     | CTION COMMIT | STATE              | 6160<br>EA Z | 04   _   _   _   _   _   _   _   _   _ |

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| Designated Agent    |        | [ ADDITIONAL ]  |
|---------------------|--------|-----------------|
| Full Name           |        |                 |
| Title or Position ▼ | CITY A |                 |
|                     | То     | elephone number |

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|--|--|----------------------------|
| Banks or Other Depositories safety deposit boxes or mainta |  |                            |
| Name of Bank, Depository, etc.                             | s.   | [ ADDITIONAL ]             |
| Meller Address   |  |                            |
| Mailing Address  |  |                            |
|  |  |                            |
|  |  |                            |
|  | CITY 🔼 STA                                     | TEA ZIP CODE A             |
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|  |  |                            |
| Name of Any Connected O                                    | ganization or Affiliated Committee             |                            |
| Name of Any Connected Of                                   | ganization of Anniated Committee               | [ ADDITIONAL ]             |
| I INTERNATIONAL UNION                                      | N OF OPERATING ENGINEERS LOCAL 825 POLITICAL A | CTION AND EDUCATION COMMIT |
|  |  |                            |
|  | 65 SPRINGFIELD AVENUE                          |                            |
| Mailing Address  |  |                            |
|  |  |                            |
|  | SPRINGFIELD I I                                | \J                         |
|  | CITY▲ STA                                      | ATE A ZIP CODE A           |
| . AEEII  | IATED  |                            |
| Relationship AFFIL   |  |                            |
| Type of Connected Organizat                                | ion:   |                            |
| Corporation  | Corporation w/o Capital Stock                  | Labor Organization         |
|  |  | -                          |
| Membership Organia   | zation Trade Association                       | Cooperative                |

| Designated Agent    |        | Ι               | ADDITIONAL ] |
|---------------------|--------|-----------------|--------------|
| Full Name           |        |                 |              |
| maining / rodi occ  |        |                 | _            |
| Title or Position ▼ | CITY A | STATE <b>A</b>  | ZIP CODE A   |
|                     |        | elephone number |              |

| FEC Form 1 (Revised                                       | 1/2001)                                      | Page <b>69</b> / <b>79</b>      |
|---|--|---------------------------------|
| Banks or Other Depositori<br>safety deposit boxes or main | tains funds.                                 | ts funds, holds accounts, rents |
| Name of Bank, Depository, e                               | uc.  | [1.22                           |
|   |  |                                 |
| Mailing Address   |  |                                 |
|   |  |                                 |
|   |  |                                 |
|   | CITY ▲ STA                                   | TE ZIP CODE A                   |
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| Name of Any Connected (                                   | Organization or Affiliated Committee         | [ ADDITIONAL ]                  |
|   |  | -                               |
| INTERNATIONAL UNIC  | N OF OPERATING ENGINEERS VOLUNTARY POLITICAL | ACTION FUND - LOCAL 832         |
| 1   |  | <b>.</b> .                      |
|   | P.O. BOX 93310 TOWN LINE ROAD                |                                 |
| Mailing Address   |  |                                 |
|   |  |                                 |
|   | ROCHESTER                                    | Y                               |
|   | CITY <b>≜</b> STA                            | ATE A ZIP CODE A                |
|   | CITTE  | ATEM ZIP CODE A                 |
| Relationship AFFI   | LIATED                                       |                                 |
| Type of Connected Organization                            | ation:                                       |                                 |
| Corporation   | Corporation w/o Capital Stock                | Labor Organization              |
|   |  |                                 |
| Membership Organ  | nization Trade Association                   | Cooperative                     |

| Designated Agent    |        | [ ADDITIONAL ]  |
|---------------------|--------|-----------------|
| Full Name           |        |                 |
| Title or Position ▼ | CITY & |                 |
|                     |        | elephone number |

| safety deposit boxes or in Name of Bank, Depositor                   |                                |                        |                   | [ ADDITIONAL ]     |
|--|--------------------------------|------------------------|-------------------|--------------------|
| Name of Bank, Deposito   | лу, е.с.                       |                        |                   |                    |
|  |                                |                        |                   |                    |
| Mailing Address  |                                |                        |                   | 1 1 1 1 1 1 1 1    |
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|  |                                | CITY 🛦                 | STATE <b>△</b>    | ZIP CODE 🛕         |
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|  |                                |                        |                   |                    |
|  |                                |                        |                   |                    |
| Name of Any Connec   | ted Organization or Affiliated | d Committee            |                   | [ ADDITIONAL ]     |
|  |                                |                        | NION OF ODERATION |                    |
|  | ted Organization or Affiliated |                        | NION OF OPERATII  |                    |
|  |                                |                        | NION OF OPERATII  |                    |
|  | STATES CONFERENCE C            | OF THE INTERNATIONAL U | NION OF OPERATII  |                    |
|  |                                | OF THE INTERNATIONAL U | NION OF OPERATII  |                    |
| NORTHEASTERN S   | STATES CONFERENCE C            | OF THE INTERNATIONAL U | NION OF OPERATII  |                    |
| NORTHEASTERN S   | STATES CONFERENCE C            | OF THE INTERNATIONAL U | NION OF OPERATII  |                    |
| NORTHEASTERN S   | STATES CONFERENCE C            | PLACE                  | NION OF OPERATII  |                    |
| NORTHEASTERN S   | STATES CONFERENCE C            | PLACE                  |                   | NG ENGINEERS PAC   |
| NORTHEASTERN S   | STATES CONFERENCE C            | PLACE                  |                   | NG ENGINEERS PAC   |
| NORTHEASTERN S  Mailing Address                                      | 11 FAIRFIELD F                 | PLACE                  |                   | NG ENGINEERS PAC   |
| NORTHEASTERN S  Mailing Address                                      | STATES CONFERENCE C            | PLACE                  |                   | NG ENGINEERS PAC   |
| NORTHEASTERN S  Mailing Address                                      | 11 FAIRFIELD F                 | PLACE                  |                   | NG ENGINEERS PAC   |
| NORTHEASTERN S  Mailing Address                                      | 11 FAIRFIELD F WEST CALDWE     | PLACE                  |                   | NG ENGINEERS PAC   |
| NORTHEASTERN S  Mailing Address  Relationship  Type of Connected Org | 11 FAIRFIELD F WEST CALDWE     | PLACE  CITY            | STATE A           | O7006 _ ZIP CODE 🛦 |
| NORTHEASTERN S  Mailing Address  Relationship                        | 11 FAIRFIELD F WEST CALDWE     | PLACE                  | STATE A           | NG ENGINEERS PAC   |

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| Designated Agent    |        | [ ADDITIONAL ]      |   |
|---------------------|--------|---------------------|---|
| Full Name           |        |                     | Ш |
| Walling Address     |        |                     |   |
| Title or Position ▼ | CITY A | STATE▲ ZIP CODE ▲   |   |
|                     | Tel    | elephone number = = |   |

| FEC Form 1 (Revis   | ed 1/2001)                      |                              |                              | Page <b>73</b> / <b>79</b>              |
|---|---------------------------------|------------------------------|------------------------------|---|
| Banks or Other Deposite<br>safety deposit boxes or ma<br>Name of Bank, Depository | aintains funds.                 | epositories in which the com | mittee deposits funds, holds | accounts, rents                         |
|   | ,                               |                              |                              |   |
|   |                                 |                              |                              |   |
| Mailing Address   |                                 |                              |                              |   |
|   |                                 |                              |                              |   |
|   |                                 |                              |                              |   |
|   | CI                              | TY 🗖                         | STATE <b>△</b>               | ZIP CODE 🛕                              |
|   |                                 |                              |                              |   |
|   |                                 |                              |                              |   |
|   |                                 |                              |                              |   |
|   |                                 |                              |                              |   |
|   |                                 |                              |                              |   |
|   |                                 |                              |                              |   |
|   |                                 |                              |                              |   |
|   |                                 |                              |                              |   |
|   |                                 |                              |                              |   |
| Name of Any Connecte  | d Organization or Affiliated Co | mmittee                      | 4.1                          | ADDITIONAL ]                            |
| NY STATE CONFERE  | NCE OF THE INTERNATIO           | NAL UNION OF OPER            | _                            | _                                       |
| '<br>   |                                 |                              |                              | 1 |
|   | . 444 WAQUINGTON                | AVENUE QUITE 004             |                              |   |
| Mailing Address   | 111 WASHINGTON                  | AVENUE SUITE 201             |                              |   |
|   |                                 |                              |                              |   |
|   | ALBANY                          |                              | L NY                         | 12210                                   |
|   | c                               | CITY <b>A</b>                | STATE 🛕                      | ZIP CODE                                |
| Relationship AF   | FILIATED                        |                              |                              |   |
| Type of Connected Organ   | nization:                       |                              |                              |   |
| Corporation   | Cor                             | poration w/o Capital Stock   | Labor Orga                   | nization                                |
| Membership Org  | ganization Trad                 | de Association               | Cooperative                  |   |

| Designated Agent    |        | [ ADDITIONAL ]     |  |
|---------------------|--------|--------------------|--|
| Full Name           |        |                    |  |
| Walling Address     |        |                    |  |
| Title or Position ▼ | CITY A | STATE A ZIP CODE A |  |
|                     | Te     | elephone number    |  |

| safety deposit box<br>Name of Bank, De   |                        |          |         |           |        |        |       |                 |            |       |            |  | [   | AD  | DITIO        | ANC         | <b>L</b> ]  |
|--|------------------------|----------|---------|-----------|--------|--------|-------|-----------------|------------|-------|------------|--|-----|-----|--------------|-------------|-------------|
|  |                        |          |         |           |        |        |       |                 |            |       |            |  |     |     |              |             |             |
| Mailing Address  |                        |          |         |           |        |        |       |                 |            |       |            |  |     |     |              | Ш           |             |
|  |                        |          |         |           |        |        |       |                 |            |       |            |  |     |     |              | ш           |             |
|  |                        |          |         |           |        |        |       |                 |            |       | Ш          |  | Ц   |     |              | ] – [       |             |
|  |                        |          |         |           | CIT    | Y 🔼    |       |                 |            | S     | TATE       | <b>■</b> ⊿                             |     | :   | ZIP CO       | DDE         | Δ           |
|  |                        |          |         |           |        |        |       |                 |            |       |            |  |     |     |              |             |             |
|  |                        |          |         |           |        |        |       |                 |            |       |            |  |     |     |              |             |             |
|  |                        |          |         |           |        |        |       |                 |            |       |            |  |     |     |              |             |             |
|  |                        |          |         |           |        |        |       |                 |            |       |            |  |     |     |              |             |             |
|  |                        |          |         |           |        |        |       |                 |            |       |            |  |     |     |              |             |             |
|  |                        |          |         |           |        |        |       |                 |            |       |            |  |     |     |              |             |             |
|  |                        |          |         |           |        |        |       |                 |            |       |            |  |     |     |              |             |             |
|  |                        |          |         |           |        |        |       |                 |            |       |            |  |     |     |              |             |             |
|  |                        |          |         |           |        |        |       |                 |            |       |            |  |     |     |              |             |             |
| Name of Any Co   | onnected Org           | anizatio | on or A | Affiliate | ed Com | mittee |       |                 |            |       |            |  |     | AD  | DITIO        | ONA         | <br>.L.1    |
|  |                        |          |         |           |        |        |       |                 |            |       |            |  | _   |     | DITIO        |             | <b>.L</b> ] |
|  |                        |          |         |           |        |        | LOCAL | . 66 PC         | DLITIC     | CAL   | EDU        | CAT                                    | _   |     |              |             | <b>.L ]</b> |
|  |                        |          |         |           |        |        | LOCAL | . <b>66 P</b> ( | DLITIC     | CAL   | EDU        | <b>CAT</b> I                           | _   |     |              |             | <b>.L ]</b> |
| NTERNATION   |                        | OF OP    | PERA    |           | ENGIN  |        | LOCAL | . 66 PC         | DLITIC     | CAL   | EDU        | CAT                                    | _   |     |              |             | <b>L</b> ]  |
| NTERNATION   |                        | OF OP    | PERA    | TING I    | ENGIN  |        | LOCAL | . <b>66 P</b> ( | DLITIC     | CAL   | EDU        | CAT                                    | _   |     |              |             | <b>.L ]</b> |
| NTERNATION   |                        | OF OP    | ZETA    | TING I    | ENGIN  |        | LOCAL | . <b>66 P</b> ( | DLITI(     | CAL   | <b>EDU</b> | CAT                                    | _   |     |              |             | <b>L</b> ]  |
| NTERNATION   |                        | OF OP    | PERA    | TING I    | ENGIN  |        | LOCAL | . <b>66 PC</b>  | DLITIC<br> | CAL   | EDU        |  | _   | COM |              |             | <b>L</b> ]  |
| NTERNATION   |                        | OF OP    | ZETA    | TING I    | ENGIN  |        | LOCAL | . 66 PC         | DLITI(     |       |            |  | _   | COM | MITT         | <b>EE</b> , |             |
| NTERNATION  Mailing Address  |                        | OF OP    | ZETA    | TING I    | ENGIN  | EERS   |       | . <b>66 PC</b>  |            | -   - | PA<br>STAT |  | _   |     | MITT         | <b>EE</b> , |             |
| NTERNATION  Mailing Address  Relationship  | AFFILIA                | OF OP    | ZETA    | TING I    | ENGIN  | EERS   |       |                 |            | -   - | PA<br>STAT |  | _   |     | 238<br>ZIP 0 | EE L        |             |
| NTERNATION  Mailing Address  Relationship  Type of Connector   | AFFILIA ed Organizatio | OF OP    | ZETA    | TING I    | ENGIN  | EERS   |       |                 |            | -   - | PA<br>STAT | ###################################### | ONG | 15  | 238<br>ZIP C | EE L        |             |
| Name of Any Control o | AFFILIA ed Organizatio | OF OP    | ZETA    | TING I    | ENGIN  | EERS   |       |                 |            | -   - | PA<br>STAT | ###################################### | _   | 15  | 238<br>ZIP C | EE L        |             |

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| Designated Agent    |        | [ ADDITIONAL ]  |
|---------------------|--------|-----------------|
| Full Name           |        |                 |
| Title or Position ▼ | CITY A |                 |
|                     | То     | elephone number |

Membership Organization

| FEC Form 1 (Revi                                    | sed 1/2001)                             | Page <b>77</b> / <b>79</b> |
|---|---|----------------------------|
| Banks or Other Deposit<br>safety deposit boxes or m |   |                            |
| Name of Bank, Depositor                             |   | [ ADDITIONAL ]             |
| Mailing Address                                     | Post Office Box 85024  Richmond  CITY 4 | VA 23285                   |
|   |   |                            |
| Name of Any Connecte                                | ed Organization or Affiliated Committee | [ ADDITIONAL ]             |
| INTERNATIONAL UI                                    | NION OF OPERATING ENGINEERS             |                            |
|   |   |                            |
| Mailing Address                                     | 1125 17TH STREET, NW                    |                            |
|   |   |                            |
|   | WASHINGTON                              | DC     20036               |
|   | CITY▲                                   | STATE ▲ ZIP CODE ▲         |
| Relationship CC                                     | ONNECTED ORGANIZATION                   |                            |
| Type of Connected Orga                              | anization:                              |                            |
| Corporation   | Corporation w/o Capital Stock           | X Labor Organization       |

Trade Association

Cooperative

| Designated Agent    |        | [ ADDITIONAL ]      |
|---------------------|--------|---------------------|
| Full Name           |        |                     |
|                     |        |                     |
| Title or Position ♥ | CITY A | STATE A ZIP CODE A  |
|                     |        | elephone number = = |

Image# 28931723541 Form/Schedule: F1AIN RESPONSE TO FEC LETTER DATED APRIL 16, 2008. AMENDING STATEMENT OF ORGANIZATION. Transaction ID: